PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE
Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
or Fax
(571)-273-2885

INCTRICCTIONS, This	form should be used t	for transmitting the ISSI	IF FFF and PUBLICATI	ON FEE (if requi	ired). Blocks 1 through 5 s	hould be completed where
appropriate. All further indicated unless correct maintenance fee notifica	correspondence including ed below or directed other	ng the Patent, advance of herwise in Block 1, by (a	rders and notification of n a) specifying a new corres	naintenance fees w pondence address;	vill be mailed to the current and/or (b) indicating a sepa	correspondence address as arate "FEE ADDRESS" for
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				(s) Transmittal. Thi ers. Each additiona	mailing can only be used for is certificate cannot be used if paper, such as an assignment of mailing or transmission.	or any other accompanying
62224	7590 12/23	3/2010	nave		of mailing or transmission.	
ADELI & TOI	\0,\frac{1}{2}	I he	reby certify that th	tificate of Mailing or Trans is Fee(s) Transmittal is being	deposited with the United	
States Postal Service with sufficient postage for first class mail in an envaddressed to the Mail Stop ISSUE FEE address above, or being factor transmitted to the USPTO (571) 273-2885, on the date indicated below.						
LOS ANGELES	6, CA 90049	(MAR 29	2011 yy trans			
۵ ا			<i>F</i> /	Margaret	M. Hasser	(Depositor's name)
		View.		pharca	A Miller	(Signature)
		TRAD TRAD		March 22	2, 2011	(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/716,316 11/17/2003			Xiaochun Nie		APLE.P0036	5248
TITLE OF INVENTION SYSTEM	V: METHOD OF IMPLI	EMENTING IMPROVEI	O RATE CONTROL FOR	A MULTIMEDIA	COMPRESSION AND EN	CODING
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUI	E FEE TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$0	\$0	\$1510	03/23/2011
EXAMINER		ART UNIT	CLASS-SUBCLASS	03/29/2011 ABELETE2 00000059 10716316		
		2483	375-240020	— 01 FC:1501 1516 66 No.		
WERNER, DAVID N 2483 1. Change of correspondence address or indication of "Fee Address"					FC:8001	3.68 ob
CFR 1.363).			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys 1 ADELI & TOLLEN LLP			
Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.			or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
Tree Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.						
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)						
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.						
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)						
APPLE INC. CUPERTINO, CALIFORNIA						
Please check the appropriate assignee category or categories (will not be printed on the patent): 🗖 Individual 🚨 Corporation or other private group entity 🗖 Government						
4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)						
☐ A check is enclosed.						
☐ Publication Fee (No small entity discount permitted) ☐ Payment by credit card. Form PTO-2038 is attached. ☐ Payment by credit card. Form PTO-2038 is attached. ☐ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any						
Advance Order -	# of Copies		overpayment, to Depo	sit Account Number	er _50-3804 (enclose a	n extra copy of this form).
	tus (from status indicate s SMALL ENTITY state		b. Applicant is no long	ger claiming SMAI	LL ENTITY status. See 37 C	FR 1.27(g)(2).
NOTE: The Issue Fee an	d Publication Fee (if req	uired) will not be accepte ites Patent and Trademark	d from anyone other than the Office.	he applicant; a regi	stered attorney or agent; or the	ne assignee or other party in
Authorized Signature				Date Mar	ch 22, 2011	
Typed or printed name Ali Makoui			Registration No. 45, 436			
			on is required to obtain or r		he public which is to file (and minutes to complete, including	d by the USPTO to process)

an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.